

Conference awards are limited by the SA Constitutional By-Laws.
 Please consult www.newpaltzsa.com for more information.

PLEASE TYPE OR PRINT CLEARLY.

Date submitted _____

Name of Organization _____ Account Number _____

Detailed description of conference (Attach the registration form or printed conference details. If you are applying as a presenter the acceptance letter must be attached.)

Day/Date _____ Beginning Time _____ Ending Time _____

Location _____

How many planning to attend _____

Contact person _____ Phone _____

Address (if on campus, please include room number) _____

Detailed itemized expenditures (Must submit written price quotes). NOTE: The SA will not reimburse the cost of food.

	PRICE QUOTES (TOTAL AMOUNT)	
	REQUESTED	APPROVED
Accommodations		
Transportation		
Registration		

TOTAL AMOUNT REQUESTED
 \$

TOTAL AMOUNT APPROVED
 \$

ACCOMMODATIONS

Please provide competitive prices. Please refer to the vendor listing at www.newpaltzsa.com

- 1. Where will you be staying? _____
- 2. How many people will be accommodated? _____
- 3. How many days will they be accommodated? _____
- 5. Does the hotel accept purchase orders?
 - Yes If yes, you must attach a requisition form.
 - No If no, what will method of payment be? _____

TRANSPORTATION

The SA uses Enterprise for car rentals.

- 1. How many people will be transported? _____
- 2. What type of transportation will be provided? _____
- 3. Have you attached a request for a car rental?

FOR SABFC USE ONLY

- Approved
- Approved with stipulations below
- Disapproved because
- Resubmit because

SABFC Chair _____